TO: USPTO NOV 1 7 2005

P.1

# BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP

TELEPHONE: (714) 557-3800

INTELLECTUAL PROPERTY LAW 12400 WILSHIRE BOULEVARD, 7th Floor Los Angeles, CA 90025

FACSIMILE: (714) 557-3347

# FACSIMILE COVER SHEET

Deliver to: Melvin Jones, USPTO	Art Group: 3744					
Facsimile No.: (571) 273-8300	Date: November 17, 2005					
From: William W. Schaal, Reg. No. 3	From: William W. Schaal, Reg. No. 39,018					
Our Docket No.: 6434P001	Number of pages10including this sheet.					
Application No.: 10/678,524	Filing Date: 10/3/2003					
Enclosed are the following documents:	Docket Due Date(s): 12/30/2005					
Amendment: <u>Response</u> ( <u>6</u> pgs)	☐ Issue Fee Transmittal					
☐ Appeal Brief (pgs)	☐ Notice of Appeal					
Application:	Petition for:					
(pgs) w/cover & abstract)	☐ Request for Continued Examination (RCE)					
Assignment & Cover Sheet ( pgs)	☐ Reply Brief (pgs)					
☑ Certificate of <u>Facsimile</u>	Request & Certification Under 35 USC 122(b)(2)(B)(i)					
☐ Continued Prosecution Application (CPA)	Request to Rescind Previous Nonpublication Request					
☐ Declaration & POA (pgs)	☐ Response to Notice of Missing Parts & Formalities Letter					
Drawings:sheets,figures	Response to Written Opinion (pgs)					
Extension of Time:	☐ Terminal Disclaimer					
☐ Drawings:sheets, figures ☐ Extension of Time: ☐ Fee Transmittal (in duplicate) ☐ IDS & PTO/SB/08 ( pgs) ☐ Other	☐ Transmittal of Publication Fce Due					
IDS & PTO/SB/08 (pgs)	☑ Transmittal Letter					
Other						
Language control of the state o	man et e menenge e man makember mengge man buggeren) dan hangan kaninak kan digij (ib e kida akan kida kan kan					
	NG/TRANSMISSION (37 CFR 1.8A)					
I hereby certify that this correspondence is being transmit Patent and Trademark Office.	ted by facsimile on the date shown helow to the United States					

Confidentiality Note: The documents accompanying this facsimile transmission contain information from the law firm of Blakely, Sokoloff, Taytor & Zafman which is confidential or privileged. The information is intended to be for the use of the individual or entity named on this transmission sheet. If you are not the intended recipient, be aware that any disclosure, copying, distribution or use of the contents of this faxed information is prohibited. If you have received this facsimile in error, please notify us by telephone immediately so that we can arrange for the retrieval of the original documents at no cost to you.

11/17/2005

If you do not receive all the pages, or if there is any difficulty in receiving, please call: (714) \$57-3800 and ask for Susan McFarlane.

# RECEIVED TO:也是所有AL FAX CENTER

NOV 1 7 2005

P.2

TRANSMITTAL FORM (to be used for all correspondence after initial filling)		Application No.	10/678,524				
		Filing Oate	October 3, 2003				
		First Named Inventor	Guadalupe Ramirez				
		Art Unit	3744				
		Examiner Name	Melvin Jones				
Total Number of Pages in This Submission 9		on 9	Attomay Docket Number	6434P001			
	ENCLOSURES (check all that apply)						
Fee Transmitta	ıl Form	Drawing(s)		After Allowance Communication to Group			
Fee Atta	ched	Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences			
Amendment / F	Response	Petition		Appeal Communication to Grou (Appeal Notice, Brief, Raply Brief)			
	After Final Affidavits/declaration(s)		Convert a Application	Proprietary Information			
Extension of Time Request		Power of Attorney, Revocation Change of Correspondence Address		Status Letter			
Express Aband	Express Abandonment Request		sclaimer	Other Enclosure(s) (please identify below):			
Information Dis	Information Disclosure Statement		Refund				
PTO/SB/08		CD, Number of CD(s)					
Certified Copy of Priority Document(s)							
Response to Missing Parte/ incomplete Application		Remarks					
Basic	: Filing Fee	rtemarts	j				
; <u> </u>	aration/POA						
Respons Parts und 1.52 or 1	e to Missing der 37 CFR 53						
_	SIGNATURE	OF APPLICANT	T, ATTORNEY, OR AGI	ENT			
Firm	William W. Schi	al, Reg. No. 3	9,018				
or Individual name BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LILP							
Signature Signature							
Date	Date November 17,2005						
	CERTIFIC	ATE OF MAILI	NG/TRANSMISSION				
I hereby certify that thi Trademark Office.	s correspondence is bei	ng transmitted via	facsimile on the date show	n below to the United States Patont and			
Typed or printed na	me Susan McFar	anc					
Signature State Movember 17, 2005							
Birsed on PTO/SB/21 (04-04) a SEND TO. Comnissiumer for P	s modified by Blakety, Solokott, T latents, P.O. Box 1450, Alexand	aylur & Zalman (Mr) 06/1 ru, VA 22313-1450	04/2004.				

NOV 1 7 2005

FEE TRANSMITTAL	Complete If Known				
	Application Numb	10/0/6,524			
for FY 2005	Filing Date		October 3, 2003		
Palont feas are subject to ennual revision.	First Named Inve		lupe Ramiro	<u> </u>	
Applicant claims small entity status. See 37 CFR 1.27.	Examiner Name	Melvin Jones			
TOTAL AMOUNT OF PAYMENT (\$) 0.00	Art Unit Attorney Docket I	3744	G1	· ·	
	Attainey Cocker	No.   6434P0	01		
METHOD OF PAYMENT (check all that apply)					
☑Check ☐Credit card ☐ Moncy Order ☐None ☐C	Other (please iden	ntify):			
	••	• • • • • • • • • • • • • • • • • • • •	Sokoloff, Tay	ylor & Zafman LLP	
For the above-identified deposit account, the Director is h	creby authorized	to: (check all th	at apply)		
Charge fee(s) indicated below			_	t for the filing fee	
	(S) Credit a	my overpayment	S.		
FEE CALCULATION				· · · · · · · · · · · · · · · · · · ·	
1. EXTRA CLAIM FEES					
Chira below Fee Paid					
Total Cours 16 20 = 0 x 25.00 = \$0.00					
Claims 3 0 X 100.00 \$0.00					
Multiple Dependent					
Large Entity Small Entity  Fig. Fig. Fig. Fig. Fig. Description					
Code (5) Code (5)					
1202 50 2702 25 Claims in excess of 20 1201 200 2201 100 Independent deline in excess of 3					
1203 380 22tt3 100 Multiple Dependent claim, if not paid					
1205 300 2204 160 "Relissue independent cleams over original patient 1205 300 2205 150 "Relissue claims in excess of 20 and over original patie	ent ""C	r number previously paid,	If greater, For Role	sues, see below	
SUBTOTAL (1) (\$) 0.00					
2. ADDITIONAL FEES Large Entity Small Entity					
Fee Fee Fac Fac					
Code (5) Code (5) Fee Description		_F	ee Paid		
1061 130 2051 65 Suncharge - late filing tee or ceith 1062 50 2052 25 Suncharge - late provisional filing tee or cover shoot.				(1	
2053 130 2n53 130 Non-English specification		-			
1251 120 2261 60 Extension for reply within first month 1252 450 2252 225 Extension for reply within second month					
1253 1,020 2063 510 Extension for reply within third month		<u> </u>			
1254 1,560 2254 795 Extension for reply within fourth month					
1401 500 2401 250 Notice of Appeal	1255 2,160 2255 1,080 Extension for repty within fifth morth				
1402 500 2402 250 Flang a brief in support of an appeal					
1403 1,000 2403 600 Request for one hearing 1451 1,510 2451 1,610 Petition to institute a public use proceeding			····—		
1460 130 2460 130 Petitions to the Commissionar					
1807 50 1807 50 Processing for under :/*7 CFR 1.17(q)					
1800 790 1809 395 Filing a submission effer final rejection (37 CFR § 1 1					
1810 730 2810 395 For each additional invention to be examined (37 CFR § 1 120(b))					
Other (en (specify)					
SUBTOTAL (2)					
SUBMITTED BY Complete (If applicable)					
	Registration No. Attorney/Agent)	39,018	Telephone	(714) 557-3800	
Signature			Date	11/17/05	
ased on PTO/SB/17 (12-04) as modified pr Biskely, Sokuluff, Taytor & Zatman (Mr) 12/15/2004. END TO: Commissioner for Patents. P.O. Brix 1460, Alexandria, VA 22313-1460					

7145573347

TO:USPTO

NOV 17 2005 P.4

FEE TRANSMITTAL for FY 2005		Complete if Known				
		Application Num	1 2010101			
		Filing Date		ctober 3, 2003		
	s are subject to annual re		First Named Inv	· · · · · · · · · · · · · · · · · · ·	upe Ramire	2
Applicant claims s	mali entity status. S	See 37 CFR 1.27.	Examiner Name		Jones	
TOTAL AMOUNT O	E DAVMENT	(\$) 0,00	Art Unit	3744		
TETTE X ALL ON TO	7 TATMENT	(\$) 0.00	Attorney Docket	No. 6434P00	)1	
METHOD OF PAY	MENT (abonto o	II that annh A				
Check Credit o			Other (please ide	:ntify):		
Deposit Account	Deposit Account	Number: 02-2666	Deposit Account	Name: Blakely, S	okoloff, Tay	lor & Zafman LLP
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  Charge fee(s) indicated below  Charge any additional fee(s) or underpayment of fee(s)  Credit any overpayments  under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.						
FEE CALCULATION			,			
1. EXTRA CLAIM  Total Claims 16 Independent Chims 3	FEES Edge Claims  20° 0 X  5° 0 X	25.00   \$0.00   \$0.00				
Multiple Dependent	ا " ب " ا					
Large Smity   Small G	nathy l					Į
Foo Fee Fee	Fea Fea Description					
Coxts (\$) Code 1202 50 2202	(5) 25 Claims in excess o	400				;
	100 independent claim					,
		nt ctalm, if not paid dent cleims over original patent				
1205 300 2205		excess of 20 and over original pa	atent	or number proviously peld, i	f greeter. For Roiss	nus. see balow
•	SUBTOTAL (1)	(\$) 0.00				
					•	
2. ADDITIONAL F	EES all Entity					
Foo Foo Foo	Fea					
Code (F)   Code	_	Fee Description		F	ee Paid	
1051 130 2061		: filing foe or ceth				
1052 50 2052 2053 130 2063		provisional filing fee or cover she	ei.			
2053 130 2063 1251 120 2261	130 Non-English epe 50 Extension for re	eanceuon ply within first month		<u> </u>		
1252 450 2252	225 Extension for rep	ply within second month				
1253 1,020 2253 1254 1,590 2254		ply willin third month ply willin fourth month				ı
1255 2,160 2255		ply within fifth month				
1401 500 2401	250 Notice of Appea				-	
1402 500 2402		upport of an appeal		ŗ.	.=1	
1403 1,000 2403 1451 1,510 2451	500 Request for oral 1,510 Petition to Institu	i Neuring 18 8 public uso proceeding		<b> _</b> -		
1460 130 2460	130 Petitions to the t			<del></del>	-1	
1807 50 1807	60 Processing fee u	inder 37 CFR 1.17(q)				
1806 180 1808 1809 790 1809		nformation Disclosure Simi				
1810 790 2810	•	on efter final rejection (37 CFR § 1		<b>]</b> .,		
1810 790 2810 396 For each additional invextion to be examined (37 CFR § 1.129(b)) Other fog (specify)						
SUBTOTAL (2)						
SUBMITTED BY Complete (if applicable)						
Name (Printrype) Willi	iam WSchaal	0//	Registration No. (Attorney/Age/ut)	39,018	Telephono	(714) 557-3800
Signature	Cott/-				Date	11/17/05

Bessed on PTO/SB/17 (12-04) asymptoticed by Blakety, Soldton: Taylor & Zafman (Mr.) 12/15/2004. SEND TO. Commissioner for Faterita. 1.0. Box. 1450, Alexandria, VA 22313-1450

TO: USPFØECEIVED CENTRAL FAX CENTER

MOV 1 7 2005

Appl. No. 10/678,524 Amdt. Dated 11/17/2005

Reply to Office Action of September 30, 2005

:

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application. No. :

10/678,524

Confirmation No. 1343

P.5

Applicant

Gualalupe Ramirez

Filed

10/03/2003

TC/A.U.

3744

Examiner

Melvin Jones

Docket No.

6434P001

Customer No.

8791

Commissioner for Patents PO Box 1450 Alexandria VA 22313-1450

### **AMENDMENT**

Sir:

In response to the Office Action of September 30, 2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks/Arguments begin on page 6 of this paper.

Appl. No. 10/678,524 Amdt. Dated 11/17/2005 Reply to Office Action of September 30, 2005

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application, No. :

10/678,524

Confirmation No. 1343

Applicant

Gualalupe Ramirez

Filed

10/03/2003

TC/A.U.

3744

Examiner

Melvin Jones

Docket No.

6434P001

Customer No.

8791

Commissioner for Patents PO Box 1450 Alexandria VA 22313-1450

### **AMENDMENT**

Sir:

In response to the Office Action of September 30, 2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks/Arguments begin on page 6 of this paper.